

MAIL THE COMPLETED FORM TO: The Appropriate EPA Regional or State Office	United States Environmental Protection Agency RCRA SUBTITLE C SITE IDENTIFICATION FORM			
1. Reason for Submittal and Status of Information Supplied (see instructions on page 9) MARK ALL BOX(ES) THAT APPLY	A. Reason for Submittal: <input type="checkbox"/> To provide initial notification (to obtain an EPA ID Number for hazardous waste, universal waste, or used oil activities). <input type="checkbox"/> To provide subsequent notification (to update site identification information). <input type="checkbox"/> As a component of a First RCRA Hazardous Waste Part A Permit Application. <input type="checkbox"/> As a component of a Revised RCRA Hazardous Waste Part A Permit Application (Amendment # _____). <input checked="" type="checkbox"/> As a component of the Hazardous Waste Report.			
2. Site EPA ID Number (see instructions on page 10)	EPA ID Number: KSD054080148			
3. Site Name (see instructions on page 10)	Name: ROBBIE MANUFACTURING INC			
4. Site Location Information (see instructions on page 10)	Street Address: 10810 MID AMERICA AVE			
	City, Town, or Village: LENEXA		State: KS	
	County Name: JOHNSON		Zip Code: 66219-	
5. Site Land Type (see instructions on page 10)	Site Land Type: <input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other			
6. North American Industry Classification System (NAICS) Code(s) for the Site (see instructions on page 10)	A. 323112		B.	
	C.		D.	
7. Site Mailing Address (see instructions on page 11)	Street or P.O. Box: 10810 MID AMERICA AVE			
	City, Town, or Village: LENEXA		State: KS	
	Country:		Zip Code: 66219-	
8. Site Contact Person (see instructions on page 11)	First Name: GEORGE		MI:	Last Name: JONES
	Phone Number: (913) 492-3400 Extension:		Email: TOMDONOVAN@PACKAGINGPRODU CTSCORP.COM	
9. Legal Owner and Operator of the Site (see instructions on pages 11 and 12)	A. Name of Site's Operator: IRV ROBINSON		Date Became Operator (mm/dd/yyyy): 01/01/1973	
	Operator Type: <input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other			
	B. Name of Site's Legal Owner: IRV ROBINSON		Date Became Owner (mm/dd/yyyy): 01/01/1973	
	Owner Type: <input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other			

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9. Legal Owner (Continued) Address	Street or P.O. Box: 10810 MID AMERICA AVE		
	City, Town, or Village: LENEXA		
	State: KS	Zip Code: 66219-	Country:

10. Type of Regulated Waste Activity
Mark 'X' in the appropriate boxes. Mark "Yes" or "No" for each choice. (See instructions on pages 13 to 16)

A. Hazardous Waste Activities
Complete all parts for Items 1 through 6.

Y ☒ N ☐ **1. Generator of Hazardous Waste**
If "Yes" choose only one of the following - a,b, or c.

☒ a. LQG: Greater than 1,000 kg/mo (2,200 lbs.) of non-acute hazardous waste; or

☐ b. SQG: 100 to 1,000 kg/mo (220 - 2,200 lbs.) of non-acute hazardous waste; or

☐ c. CESQG: Less than 100 kg/mo of non-acute hazardous waste

In addition, indicate other generator activities (check all that apply)

Y ☐ N ☒ d. United States Importer of Hazardous Waste

Y ☐ N ☒ e. Mixed Waste (hazardous and radioactive) Generator

For Items 2 through 6, check all that apply:

Y ☐ N ☒ **2. Transporter of Hazardous Waste**

Y ☐ N ☒ **3. Treater, Storer, or Disposer of Hazardous Waste (at your site)** Note:
A hazardous waste permit is required for this activity

Y ☐ N ☒ **4. Recycler of Hazardous Waste (at your site)**
Note: A hazardous waste permit may be required for this activity.

5. Exempt Boiler and/or Industrial Furnace

Y ☐ N ☒ a. Small Quantity On-site Burner Exemption

Y ☐ N ☒ b. Smelting, Melting, Refining Furnace Exemption

Y ☐ N ☒ **6. Underground Injection Control**

B. Universal Waste Activities

1. Large Quantity Handler of Universal Waste (accumulate 5,000 KG or more) [refer to your State regulations to determine what is regulated]. Indicate types of universal waste generated and/or accumulated at your site. (check all boxes that apply)

	Generated	Accumulated
a. Batteries	<input type="checkbox"/>	<input type="checkbox"/>
b. Pesticides	<input type="checkbox"/>	<input type="checkbox"/>
c. Thermostats	<input type="checkbox"/>	<input type="checkbox"/>
d. Lamps	<input type="checkbox"/>	<input type="checkbox"/>
e. Other _____	<input type="checkbox"/>	<input type="checkbox"/>
f. Other _____	<input type="checkbox"/>	<input type="checkbox"/>
g. Other _____	<input type="checkbox"/>	<input type="checkbox"/>

Y ☐ N ☒ **2. Destination Facility for Universal Waste**
Note: A hazardous waste permit may be required for this activity.

C. Used Oil Activities - Mark all boxes that apply

Y ☐ N ☒ **1. Used Oil Transporter**
If "Yes", mark each that applies.

☐ a. Transporter

☐ b. Transfer Facility

Y ☐ N ☒ **2. Used Oil Processor and/or Re-refiner -**
If "Yes", mark each that applies.

☐ a. Processor

☐ b. Re-refiner

Y ☐ N ☒ **3. Off-Specification Used Oil Burner**

Y ☐ N ☒ **4. Used Oil Fuel Marketer**
If "Yes", mark each that applies.

☐ a. Marketer Who Directs Shipment of Off-Specification Used Oil to Off-Specification Used Oil Burner

☐ b. Marketer Who First Claims the Used Oil Meets the Specifications

11. Description of Hazardous Wastes (see instructions on page 17)

A. Waste Codes for Federally Regulated Hazardous Wastes. Please list the waste codes of the Federal hazardous wastes handled at your site. List them in the order they are presented in the regulations (e.g., D001, D003, F007, U112). Use an additional page if more spaces are needed.

D001						

B. Waste Codes for State-Regulated (i.e., non-Federal) Hazardous Wastes. Please list the waste codes of the State-regulated hazardous wastes handled at your site. List them in the order they are presented in the regulations. Use an additional page if more spaces are needed for waste codes.

12. Comments (see instructions on page 17)

TOMDONOVAN@PACKAGINGPRODUCTSCORP.COM

13. Certification. I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. (see instructions on page 17)

Signature of owner, operator, or an authorized representative	Name and Official Title (type or print)	D. Date Signed (mm-dd-yyyy)
	GEORGE JONES	02/24/2006
	MFG PROJECTS	

SITE NAME

ROBBIE MANUFACTURING INC
10810 MID AMERICA AVE
LENEXA, KS 66219

EPA ID NO: KSD054080148

**FORM
GM**

U.S. ENVIRONMENTAL
PROTECTION AGENCY
2005 Hazardous Waste Report

**WASTE GENERATION
AND MANAGEMENT**

Sec. 1	A. Waste Description WASTE FLAMMABLE LIQUID FROM FLEXOGRAPHIC PRINTING OPERATION			
B. EPA Hazardous Waste Code D001		C. State Hazardous Waste Code		
D. Source Code G09 Management Method code for Source code G25		E. Form Code W219	F. Quantity Generated in 2005 128.90	G. UOM 2 Density 0.00 lb./gal.
Sec. 2	Was any of this waste managed on-site? No			
ON-SITE PROCESS SYSTEM 1		ON-SITE PROCESS SYSTEM 2		
On-site process system type		Quantity treated, disposed, or recycled on-site in 2005		On-site process system type Quantity treated, disposed, or recycled on-site in 2005
Sec. 3	A. Was any of this waste shipped off site in 2005 for treatment, disposal, or recycling? Yes			
Site # 1	B. EPA ID No. of facility to which waste was shipped WID990829475	C. Off-site Management Method code shipped to H141	D. Total quantity shipped in 2005 128.90	
Comments G09 - WASTE FLAMMABLE LIQUID FROM CLEANUP OF PRINTING EQUIPMENT. W219 - PRIMARILY WASTE LIQUID WITH LOW INORGANIC PRINTING INK SOLIDS.				

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FORM
GM

WASTE GENERATION
AND MANAGEMENT

Sec. 1	A. Waste Description WASTE FLAMMABLE LIQUID FROM FLEXOGRAPHIC PRINTING OPERATION			
B. EPA Hazardous Waste Code D001		C. State Hazardous Waste Code		
D. Source Code G09 Management Method code for Source code G25		E. Form Code W219	F. Quantity Generated in 2005 15.60	G. UOM 2 Density 0.00 lb./gal.
Sec. 2	Was any of this waste managed on-site? No			
ON-SITE PROCESS SYSTEM 1		ON-SITE PROCESS SYSTEM 2		
On-site process system type		Quantity treated, disposed, or recycled on-site in 2005		On-site process system type Quantity treated, disposed, or recycled on-site in 2005
Sec. 3	A. Was any of this waste shipped off site in 2005 for treatment, disposal, or recycling? Yes			
Site # 1	B. EPA ID No. of facility to which waste was shipped WID990829475	C. Off-site Management Method code shipped to H141	D. Total quantity shipped in 2005 15.60	
Comments G09 - WASTE FLAMMABLE LIQUID FROM WASTE INK AND INK CLEANUP OF PRINTING EQUIPMENT. W219 - PRIMARILY WASTE LIQUID WITH HIGH INORGANIC PRINTING INK SOLIDS THOUGH NOT CONSIDERED SLUDGE.				

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U.S. ENVIRONMENTAL
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**WASTE GENERATION
AND MANAGEMENT**

Sec. 1	A. Waste Description WASTE FLAMMABLE SOLID FROM FLEXOGRAPHIC PRINTING OPERATION			
B. EPA Hazardous Waste Code D001		C. State Hazardous Waste Code		
D. Source Code G33 Management Method code for Source code G25		E. Form Code W409	F. Quantity Generated in 2005 4.00	G. UOM 2 Density 0.00 lb./gal.
Sec. 2	Was any of this waste managed on-site? No			
ON-SITE PROCESS SYSTEM 1		ON-SITE PROCESS SYSTEM 2		
On-site process system type		Quantity treated, disposed, or recycled on-site in 2005		On-site process system type Quantity treated, disposed, or recycled on-site in 2005
Sec. 3	A. Was any of this waste shipped off site in 2005 for treatment, disposal, or recycling? Yes			
Site # 1	B. EPA ID No. of facility to which waste was shipped WID990829475	C. Off-site Management Method code shipped to H141	D. Total quantity shipped in 2005 4.00	
Comments W409 - PRIMARILY WASTE SOLID CONSISTING OF FLOOR SWEEP MATERIAL, AND CLEAN-UP RAGS FROM THE OPERATION.				

U.S. ENVIRONMENTAL
PROTECTION AGENCY
2005 Hazardous Waste Report

SITE NAME

ROBBIE MANUFACTURING INC
MID AMERICA AVE
LENEXA

KS 66219

EPA ID NO: KSD054080148

FORM
OIOFF-SITE
IDENTIFICATION

Form 1	A. EPA ID No. of off-site installation or transporter KSD984969238	B. Name of off-site installation or transporter BARTON SOLVENTS
C. Handler Type N Generator Y Transporter N TSDR		D. Address of off-site installation Street City State Zip -

Form 2	A. EPA ID No. of off-site installation or transporter NE0000080580	B. Name of off-site installation or transporter TRANSWOOD INC
C. Handler Type N Generator Y Transporter N TSDR		D. Address of off-site installation Street City State Zip -

Form 3	A. EPA ID No. of off-site installation or transporter WID990829475	B. Name of off-site installation or transporter WRR ENVIRONMENTAL SERVICES
C. Handler Type N Generator N Transporter Y TSDR		D. Address of off-site installation Street 5200 STATE RD 93 City EAU CLAIRE State WI Zip 54701-